

an easier way?

METHAMPHETAMINE HYDROCHLORIDE

is an easier way to help control food craving & keep the reducer happy

With "hunger pains" abolished, the patient can shrug off the chains of psychogenic craving that bind him to his habit of overeating and cooperate cheerfully with the prescribed diet.

In obesity, "...our drug of choice has been methedrine (methamphetamine hydrochloride)... because it produces the same central effect with about one-half the dose required with plain amphetamine, because the effect is more prolonged, and because undesirable peripheral effects are significantly minimized or entirely absent." Douglas, H. S.: West, J. Surg. 59:238 (May) 1951.

Description: Each scored tablet contains 5 mg. 'Methedrine' brand Methamphetamine Hydrochloride.

Dosage: 2.5 mg. (1/2 tablet) 3 times daily. May be increased gradually according to response; more than 10 mg. daily rarely is needed. The last dose of the day should not be taken later than 6 hours before bedtime.

Side effects: Insomnia may occur if taken later than 6 hours before retiring. The usual peripheral actions of sympathomimetic amines (vasoconstriction and acceleration of the heart) are minimal and little noticed on low or moderate dosage.

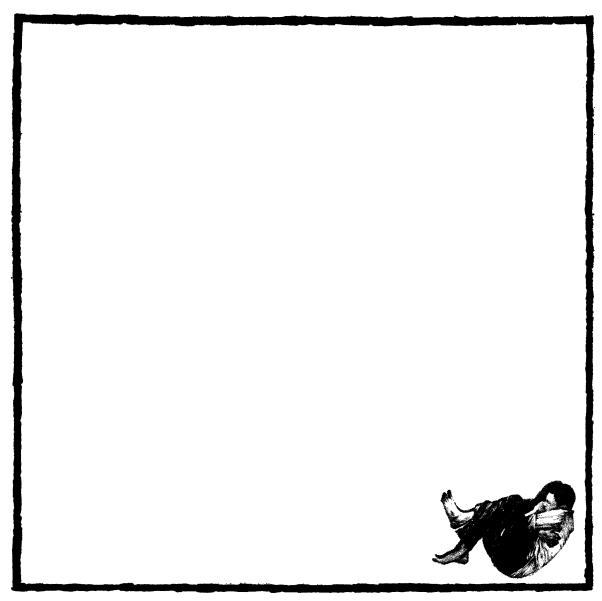
Contraindications and precautions: Should not be used in patients with myocardial degeneration, coronary disease, marked hypertension, hyperthyroidism, Insomnia or a sensitivity to ephedrine-like drugs. Moderate hypertension in the obese is not necessarily a contraindication since it may be relieved as the overweight is reduced.

Supplied: Tablets 5 mg., scored, in bottles of 100 and 1000.



Complete literature available on request from Professional Services Dept. PML.

BURROUGHS WELLCOME & CO. (U.S.A.) INC., Tuckahoe, N.Y.



How NALLINE helps to keep the lid on drug addiction in California

The use of the narcotic antagonist Nalline, as a test of addiction, has significantly curtailed illicit narcotic traffic in Alameda County, California. In penal terms alone, three years after the institution of the test using Nalline, prison admissions for addiction had dropped from 13.7% of total admissions to 4.4%.

The test was given to persons suspected of addiction and to addicts as a condition of probation or parole.

NALLINE does not cure addiction. It can, however, help addicts psychologically, because they know NALLINE detects relapse and that relapse leads to a return to prison or hospital. Definitive answers to the epidemiology of addiction—in itself a symptom of an underlying disease that may be psychologic, physiologic, or pharmacologic in nature—are, as yet, unknown.^{2,3}

The test should be undertaken only by physicians experienced in dealing with narcotic addicts.

Brief Summary: Indications: To reverse significant respiratory depression due to opiates. Diagnostic—to test for opiate narcotic addiction.

Side Effects, Precautions, and Contraindications: Do not use in mild or non-opiate

respiratory depression. Use with extreme caution and in small doses in narcotic addicts and in non-addicted patients receiving opiate narcotics due to risk of violent withdrawal symptoms. Effect gradually lost on successive doses which may result in respiratory depression. Untoward reactions include dysphoria, miosis, pseudoptosis, lethargy, drowsiness, sweating, pallor, nausea, psychotomimetic manifestations. Before prescribing or administering, read product circular with package or available on request.

Note: NALLINE will not precipitate abstinence symptoms in meperidine addicts unless they are taking 1,600 mg. or more daily. The ability of NALLINE to detect addiction to codeine is unknown.

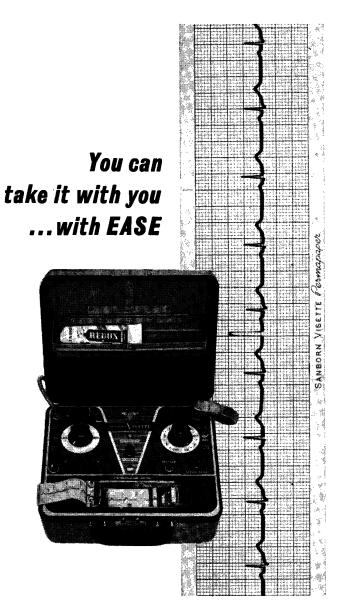
1. Brown, T. T.: The Enigma of Drug Addiction, Springfield, III., Charles C Thomas, 1961, pp. 287-334. 2. Chesnick, R. D.: Med. Times 90:247 (March) 1962. 3. Narcotic Addiction Symposium: New York Med. 18:562 (August 20) 1962. Supplied: Ampuls of 1 and 2 cc. and vials of 10 cc., each cc. containing 5 mg. of nalorphine hydrochloride.

Note: The Federal Bureau of Narcotics now classifies NALLINE as a Class M. narcotic preparation. Thus, the purchase of this preparation no longer requires a Federal Narcotic Order Form.

NALLINE is a trademark of Merck & Co., Inc. MERCK SHARP & DOHME

Division of Merck & Co., Inc., West Point, Pa.





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The outstanding effectiveness and record of safety with which 'Miltown' (meprobamate) relieves anxiety and anxious depression has been clinically authenticated time and again during the past eight years. This, undoubtedly, is one reason why physicians still prescribe meprobamate more than any other tranquilizer in the world.

Slight drowsiness may occur with meprobamate and, rarely, allergic reactions. Meprobamate may increase effects of excessive alcohol. Use with care in patients with suicidal tendencies. Massive overdosage may produce coma, shock, vasomotor and respiratory collapse. Consider possibility of dependence, particularly in patients with history of drug or

alcohol addiction. Withdraw gradually after prolonged use at high dosage.

Usual dosage: 1 or 2 400 mg. tablets t.i.d. **Supplied:** 400 mg. scored tablets, 200 mg. sugar-coated tablets; bottles of 50.

the original meprobamate Miltown



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antidandruff shampoo (containing pHisoHex®)

for potentiated control of dandruff. seborrhea "dry"..."oily"... "itching" scalp

keeps hair and scalp cleaner, freer of bacteria

Now-through a multiple therapeutic approach, new pHisoDan quickly and effectively ends dandruff, seborrheic scaling, excessive oiliness, dryness and itching of the scalp. pHisoDan combines the highly effective antibacterial and detergent actions of pHisoHex † with the penetrating keratolytic and fungicidal actions of dermatologic precipitated sulfur and sodium salicylate.

in 1062 patients treated by 86 dermatologists for seborrhea of the scalp (both sicca and oleosa), excellent or good results were achieved in more than 90 per cent with pHisoDan.1

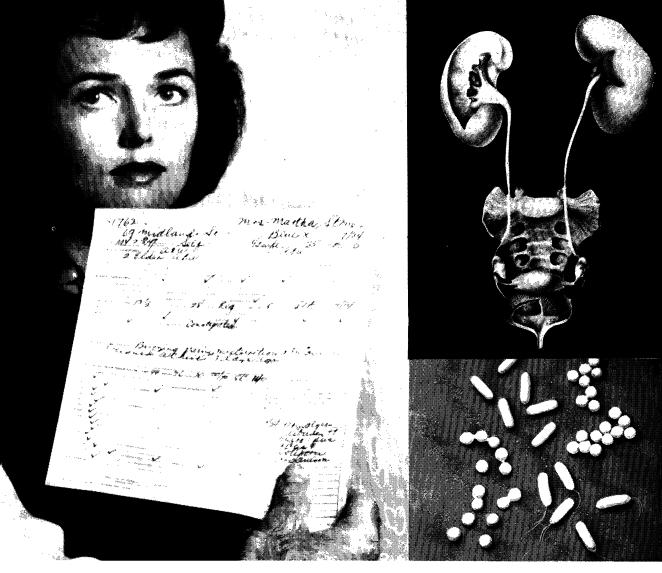
pHisoDan cleans hair thoroughly, keeps the scalp freer of bacteria. pHisoDan is mild, nontoxic, does not sting or stain when used as directed, pHisoDan should be used two or three times weekly until scalp improves, then once a week.

Supplied: 43/4 oz. plastic squeeze bottles. See Winthrop literature for more information.

1. Data in the files of Research Department, Sterling Winthrop Institute.

Winthrop Laboratories, New York 18, N.Y.

*Trademark pHisoHex, trademark reg. U.S. Pat. Off. 13% hexachlorophene and entsufon



all things considered

in cystitis, having weighed the classical considerations basic to management, physicians often choose DECLOMYCIN demethylchlortetracycline HCl for broad-spectrum antibiotic therapy. DECLOMYCIN demethylchlortetracycline HCl produces activity levels higher than do other tetracyclines...at lower dosage...and maintains them without significant fluctuation.

Activity is prolonged 24 to 48 hours after the last dose, thus helps protect against relapse – an "extra dimension" in broad-spectrum control.

Effective in a wide range of everyday infections—respiratory, urinary tract and others—in the young and aged—the acutely or chronically ill—when the offending organisms are tetracycline-sensitive. Side Effects typical of tetracyclines which may occur: glossitis, stomatitis, proctitis, nausea, diarrhea, vaginitis, dermatitis, overgrowth of nonsusceptible organisms. Also: photodynamic reaction (making avoidance of direct sunlight advisable) and, very rarely, anaphylactoid reaction. Contraindications: none. Capsules, 150 mg. and 75 mg. of demethylchlortetracycline HCl. Average Adult Daily Dosage: 150 mg. q.i.d. or 300 mg. b.i.d.

the decision is for

DESCRIPTION OF THE THE HELDER THE

Lodorle

Cytellin Sitosterols

the cholesterol-lowering agent with an unparalleled record of safety

In the more than seven years that Cytellin has been in continuous use, no side-effects, drug tolerance, or incompatibilities have ever been reported. In addition, Cytellin does not accumulate in the blood or tissues or produce toxic manifestations.¹

Yet Cytellin is notably effective.

It has prevented hypercholesteremia and atherosclerosis in experimental animals² and actually caused regression of already formed atherosclerotic plaques.³ Furthermore, in extensive clinical studies, Cytellin has lowered elevated serum cholesterol in over 85 percent of cases without dietary restrictions.

When a hypercholesteremic patient is in your office and safety is on your mind, specify Cytellin; it lowers serum cholesterol...safely.

1. Shipley, R. E., Pfeiffer, R. R., Marsh, M. M., and Anderson, R. C.: Circulation Res., £:373, 1958. 2. Peterson, D. W., Nichols, C. W., Jr., and Shneour, E. A.: J. Nutrition, 47:57, 1952. 3. Diller, E. R., Woods, B. L., and Harvey, O. A.: Proc. Soc. Exper. Biol. & Med., 96:813, 1958.

In summary: Cytellin is a lightly flavored aqueous suspension of sitosterols used in conditions in which a sustained reduction of hypercholesteremia is desired. Side-effects have not been observed, nor are there any contra

Additional information available upon request. Eli Lilly and Company, Indianapolis 6, Indiana. 300006



IN DIARRHEAS



Patient: W. O. Age: 45 Sex: F Weight 96

Diagnosis: Functional diarrhea

Results: Definite Side Effects: None

Comment: Patient has been on R-1132 (Lomotil) for fifteen months

with definite improvement.

ACUTE

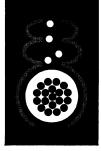
RECURRENT

CHRONIC

LOMOTIL ANTIDIARRHEAL TABLETS LIQUID

brand of Diphenoxylate Hydrochloride with Atropine Sulfate

PROMPT · SAFE · EFFICIENT



Lomotil directly controls the mechanism of diarrhea. Therefore, it acts to give symptomatic relief in all diarrheas.

Lomotil promptly arrests acute diarrhea and controls chronic or refractory diarrhea with a high degree of safety.

Pharmacologic considerations indicate that Lomotil acts on the smooth muscle of the intestines and thus lowers the excessive propulsive motility responsible for increased fluidity and frequency of stools. This localized action makes Lomotil unusually free of secondary effects.

By reducing excess propulsive motility, Lomotil assures safe, selective symptomatic control of virtually all diarrheas.

Dosage: For adults the recommended initial dosage is two tablets (2.5 mg. each) three or four times daily. Lomotil

maintenance dosage may be as low as two tablets daily.

Lomotil is supplied as unscored, uncoated white tablets of 2.5 mg. and as liquid containing 2.5 mg. in each 5 cc. A subtherapeutic amount of atropine sulfate (0.025 mg.) is added to each tablet and each 5 cc. of the liquid to discourage deliberate overdosage. Recommended dosage schedules should not be exceeded.

Note: Lomotil is an exempt preparation under Federal narcotic statutes.

Detailed information and directions for use in children and adults are available in Physicians' Product Brochure No. 81. G. D. Searle & Co., P. O. Box 5110, Chicago 80, Illinois.

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In Sprains, Strains and Muscle Spasm, 'Soma' Compound

numbs the pain...not the patient

A potent analgesic and a superior muscle relaxant

- 1. A sprain or fracture is not a big clinical problem-but it does hurt. And if there is housework to do and kids to mind, the patient needs something to numb the pain.
- 2. A.P.C. compounds have limited usefulness; and the patient can buy them without your prescription. Unfortunately, most of them are too mild to be effective for sprains—and more potent products too often make the patient feel 'dopey'.
- 3. 'Soma' Compound is ideal in these cases. Since it contains both 'Soma' (carisoprodol) and acetophenetidin it is both a potent analgesic and a superior muscle relaxant; it also contains caffeine to offset any drowsiness ("numbs the pain ... not the patient").

- 4. Why not try 'Soma' Compound? Dosage is 1 or 2 tablets q.i.d. For more severe pain, try 'Soma' Compound+Codeine. Dosage: 1 or 2 tablets q.i.d.
- 5. Hypersensitivity to carisoprodol may occur rarely. Codeine may produce addiction, nausea, vomiting, constipation or miosis.

Soma Compound



carisoprodol 200 mg., acetophenetidin 160 mg., caffeine 32 mg.

Soma Compound + Codeine



carisoprodol 200 mg., acetophenetidin 160 mg., caffeine 32 mg., codeine phosphate 16 mg. (Warning-may be habit forming.)

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THE FIFTH ANNUAL COURSE ON EMOTIONAL AND PSYCHIATRIC PROBLEMS IN MEDICAL PRACTICE

Monday, October 14, 1963 through January 31, 1964 Deadline for Registration: Friday, September 27, 1963

Fee: \$10.00

The New York Academy of Medicine will present the fifth in an annual series of courses on *Emotional and Psychiatric Problems in Medical Practice*, starting Monday, October 14, 1963.

The course is open to all physicians in specialty and general practice and will consist of basic and advanced sections and a special pediatric section, meeting at weekly intervals for 14 one and one-half hour seminars in the Academy building.

The objective of this course is to help physicians comprehend more fully the continuous interaction of psychological, social and medical factors as encountered in clinical practice, thus leading to more effective patient care and greater satisfaction for the doctor.

The basic sections, for the benefit of those who have not previously participated in the course series or its equivalent, will combine didactic and group discussion methods of instruction, and will be oriented around a syllabus. Clinical cases from the practices of the participants will be utilized to illustrate and elaborate the course material.

The advanced sections will be open to physicians who previously have participated in the basic course or its equivalent. In these sections the program will consist largely of discussions, guided by the instructor, to illustrate basic psychiatric principles operating in the clinical material presented. The emphasis will be on practical problems of management.

A special pediatric section, for pediatricians and other practitioners with particular interest in problems of children and adolescents.

This course, which is supported by a grant from the United States Public Health Service, is co-sponsored by the New York County Chapter of the American Academy of General Practice and is acceptable for 21 hours of Category I credit for its completion.

For information and application forms address:

The Executive Secretary for Medical Education

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fast-acting-specific affinity for the urinary tract; antibacterial concentrations in the urine within 30 minutes. wide-acting-bactericidal against a broad range of pathogens, including certain organisms now resistant to sulfonamides and antibiotics, permeates all parts of the nephron with a 3-component system of transport. 1,2,8 minimal resistance problems in over a decade of clinical use. no superinfection-monilial superinfection, staphylococcal enteritis, proctitis and anovulvar pruritus have not been reported. no crystalluriasoluble over a pH range of 3.6 to 7.3. well tolerated-tolerance is enhanced by the simple expedient of taking with meals, and with food or milk on retiring. no cross resistance or cross sensitization with other drugs.

precautions, contraindications and untoward reactions—Caution is recommended in the presence of diminished renal function which may reduce excretion of the drug and require smaller doses; oliguria and anuria are contraindications. Peripheral neuropathy has been reported; most of these patients were uremic, anemic, diabetic or had other debilitating conditions. In such cases the drug should be used only when indicated by in vitro sensitivity tests and dosages carefully controlled. Discontinue drug if numbness or tingling occurs. Hemolytic anemia has occurred in primaquinesensitive individuals; the condition is reversible when the drug is withdrawn. In repeated or prolonged therapy, frequent chemical and cellular blood evaluations as well as determination of the minimum effective dose are strongly advised. Infants under one month of age should not receive the drug.

Should nausea or emesis occur, a smaller dose is indicated. Allergic skin reactions develop occasionally, other hypersensitivity conditions, such as fall in blood pressure, asthmatic symptoms, muscular aches, jaundice and low grade fever, are rare. Headache or malaise occurs occasionally.

SUPPLIED: FURADANTIN (nitrofurantoin) TABLETS 50 and 100 mg. FURADANTIN (nitrofurantoin) ORAL SUSPENSION contains 25 mg. FURADANTIN (nitrofurantoin) per 5 cc. teaspoonful suspended in a water-miscible, palatable gel composed of glycerol 42%, alcohol 10%, magnesium aluminum silicate, propionic acid, methylparaben, flavoring and water.

1. Buzard, J. A., et al.: Amer. J. Physiol. 202:1136, 1962. 2. Woodruff, M. D., et al.: J. A. M. A. 175:1132, 1961. 3. Paul, M. F., et al.: Amer. J. Physiol. 197:580, 1959.

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relation of structure to function—A huge filtration surface is presented by the thin, porous walls of the tortuous capillaries. The epithelial cells (podocytes) do not provide a continuous covering, but support the capillary loops by means of delicate, footlike extensions. Only the basement membrane appears to stand intact between the blood and the glomerular filtrate. Recently, however, other extremely fine "ultramembranes" have been detected covering the capillary pores, and bridging the clefts between the feet of the podocytes.

References on electron microscopy of the nephron:
Rhodin, J., in: Renal Disease (edited by D. A. K. Black), F. A.
Davis Company, Philadelphia, 1962/Ham, A. W., and Leeson,
T. S.: Histology, J. B. Lippincott Company, Philadelphia, 1961/
Rhodin, J.: Int. Rev. Cytol. 7.485, 1958/Pease, D.C.: Anat. Rec.
121,723, 1955/Pease, D.C.: J. Histochem. Cytochem, 3:295, 1955.

